Executive Branch Personnel PUBLIC FINANCIAL DISCLOSURE REPORT

Form Approved: OMB No. 3209 - 0001

OGE Use Only]		
Agency Use Only			
of filing.	indicate number of days)	(Check box if filing extension granted & Indicate number of days	
the preceding two calendar years and the current calendar year up to the date		If additional space is required, use the reverse side of this sheet)	Comments of Reviewing Officials (if additional space
arrangements as of the date of filing. Schedule DThe reporting period is	5/10/12	& lan fix	Use Only
Schedule C, Part II (Agreements or Arrangements)—Show any agreements or	Date (Month, Day, Year)	Signature	Office of Government Ethics
any date you choose that is within 31 days of the date of filing.	5/8/12	Kathyn M. Buennler	On the basis of information contained in this report, I conclude that the filer is in compliance with applicable laws and regulations (subject to any comments in the bux below).
reporting period is the preceding calendar	Date (Month, Day, Year)	Signature of Designated Agency Ethics Official/Reviewing Official	Agency Ethics Official's Opinion
Schedule B-Not applicable. - Schedule C. Part I (Tiabilities)-The	5-8-12	Meather Cottage	(If desired by agency)
as of any date you choose that is within — 31 days of the date of filing.	Date (Month, Day, Year)	Signature of Other Reviewer	Other Review
Schedule A—The reporting period for income (BLOCK C) is the preceding calendar year and the current calendar year up to the date of filing. Value assets	5/8/12	(South)	CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of any knowledge.
Vice President:	Date (Month, Day, Year)	Signature of Reporting Individual	Certification
Candidates for President and			
Nominaco New Entra	× ×	_	Presidential Nominees Subject to Senate Confirmation
at the date of termination, Part II of Schedule D is not applicable.	Do You Intend to Create a Qualified Diversified Trust?	Name of Congressional Committee Considering Nomination Do You Intend	
Termination Filers: The reporting period begins at the end of the period covered by your previous filing and ends		Title of Position(s) and Date(s) Held	Position(s) Held with the Federal Government During the Preceding 12 Months (If Not Same as Above)
where you must also include the filing year up to the date you file. Part II of Schedule D is not applicable.	202-456-1414	White House, 1600 Pennsylvania Ave. NW, Washington, D.C. 20500	Office g address)
	Telephone No. (Include Area Code)	Address (Number, Street, City, State, and ZIP Code)	Location of
Reporting Periods Incumbents: The reporting period is		President	Position for Which Filing
to a \$200 ree.	r Agency (If Applicable)	Title of Position Department or Agency (II	
than 30 days after the last day of the filing extension period, shall be subject	Ŧ	Obama Barack	Individual's Name
filed, or, if an extension is granted, more	d Middle Initial	Last Name First Name and Middle Init	
		riate	
	Termination Termination Date (It Appli-	Reporting Incumbent Calendar Year New Entrant, Status Covered by Report Nominee, or	or Nomination (Month, Day, Year)

Reporting Individual's Nam Obama, Barack H.	Reporting Individual's Name bama, Barack H.											S	CF	HEDULE	DI			>												-	2 of	00
	Assets and Income		at	C<	alu ose	of	rep	Valuation of Assets close of reporting period	As	set pe	rio	177					유표	Income: checked,	me ed,	₽Q.	pe	anc	ent	100	nt.	eec H,	No	ne in	(Or Blo	ck (type and amount. If "None (or less than \$201)" i no other entry is needed in Block C for that item.	5
	BLOCK A	-				В	BLOCK B	K B																BLOCK C	KC							4
For you, production	For you, your spouse, and dependent children, report each asset held for investment or the production of income which had a fair market the expending \$1,000 at the close of the report.										0	00		ıd				Туре	ĕ		<u>'</u>				_		Amount	-un				
production of inc. value exceeding S: ing period, or whi in income during; with such income. For yourself, also amount of earned than from the U.S. (report the source income of more to actual amount of your spouse). None	production of income which had a land market value exceeding \$1,000 at the close of the reporting period, or which generated more than \$200 in income during the reporting period, together with such income. For yourself, also report the source and actual amount of earned income exceeding \$200 (other than from the U.S. Government). For your spouse, report the source but not the amount of earned income of more than \$1,000 (except report the actual amount of any honoraria over \$200 of your spouse).	None (or less than \$1,001)	\$1,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	Over \$1,000,000*	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	Over \$50,000,000	Excepted Investment Fund	Excepted Trust	Qualified Trust	Dividends	Rent and Royalties	Interest	Capital Gains	None (or less than \$201)	\$201 - \$1,000	\$1,001 - \$2,500	\$2,501 - \$5,000 \$5,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$1,000,000	Over \$1,000,000*	\$1,000,001 - \$5,000,000	Over \$5,000,000	Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.) Only if Honoraria
	Central Airlines Common				×												×		-				×		<u>}</u>		-	-	-			
Examples	Doe Jones & Smith, Hometown, State			×														<u> </u>	<u> </u>	-	<u> </u>							-	-		Law Partnership Income \$130,000	1
	Kempstone Equity Fund	-				×					1	i	İ	×				1	-	-	<u> </u>			×	-	1	÷	1	-	-		
	IRA: Heartland 500 Index Fund	\vdash	 					×	Т	\top		T	\Box	×		丄	1	\perp	\bot	+	\bot	\vdash	+-	×	+^	+	+	+	+	+		
JPMon Checki	JPMorgan Chase Private Client Asset Mgmt Checking Account (J)							X											×		×		_									
2 Northe	Northern Trust Checking Account (J)			×															×		×											
3 Vangu	Vanguard 500 Index Fund (Retirement)				X									×									×									
4 State of Benefit	State of Illinois General Assembly Defined Benefit Pension Plan				×															11	×									-		
5 Vangu	Vanguard 500 Index Fund (Retirement) (S)					×								X									×									
6 Vangu	Vanguard 500 Index Fund (Retirement) (S)				\times									X									×			-						-

	9	œ	7	9	ر.	4	w	2	П					은 ~
* This category applies only if the asset/income is solely that of the filer's spouse or dependent children. by the filer with the spouse or dependent children, mark the other higher categories of value, as appro-	- PIMCO Total Return 529 Portfolio	- Calvert Equity Portfolio 529 Portfolio	Bright Directions College Savings 529 Plan (DC)	- PIMCO Total Return 529 Portfolio	- Calvert Equity Portfolio 529 Portfolio	Bright Directions College Savings 529 Plan (DC)	U.S. Treasury Bills (J)	U.S. Treasury Notes (J)	U.S. Treasury Bilts - SEP/IRA			BLOCK A	Assets and Income	Reporting Individual's Name Obama, Barack H.
is so			_							None (or less than \$1,001)				
olely n, m										\$1,001 - \$15,000		1	بع	
tha										\$15,001 - \$50,000			Valuation of Assets at close of reporting period	
t of	×	×		×	×					\$50,001 - \$100,000			alu	
the J)the									×	\$100,001 - \$250,000		-	of i	
filer' r hig										\$250,001 - \$500,000		BLOCK B	ep on	
s sp							×			\$500,001 - \$1,000,000		K B	of orti	
ouse cate										Over \$1,000,000*			ng	S
gori								×		\$1,000,001 - \$5,000,000			set per	
dep es o										\$5,000,001 - \$25,000,000			100	CHEDULE (Use only
ende f val										\$25,000,001 - \$50,000,000) 4	\ \(\tilde{\ti
ue,										Over \$50,000,000				
ndent children. If the value, as appropriate.	×	X		×	×					Excepted Investment Fund				Use only
ren.										Excepted Trust				
i II										Qualified Trust	_	<u> </u>		
he a										Dividends	┦긃		₽ I	continued (eeded)
asset/inco							\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		Rent and Royalties	Туре		Income: checked,	d) H
/inc							×	×	×	Interest	e		ne: ed,	111
ome										Capital Gains	+-	1	no	ed
ise	×	×		×	×	-				None (or less than \$201) \$201 - \$1,000	-		oth	
ithe		-				-	×	-	×	\$1,001 - \$2,500	\dashv		er and	
me is either that of the filer or jointly held						-	-			\$2,501 - \$5,000	-		type and amount. If "None no other entry is needed in	
ıt of								×	_	\$5,001 - \$15,000	-	BLOCK C	ry i	
the	-							-		\$15,001 - \$50,000	+	K C	nt. s n	
filer	-									\$50,001 - \$100,000	45		eed If "	
07						<u> </u>				\$100,001 - \$1,000,000	Amount		ed No	
join								-		Over \$1,000,000*	1#		in	
ily h		-								\$1,000,001 - \$5,000,000	1		85 ₀	
eld										Over \$5,000,000	1		(or less Block C	7
										Other Income (Specify Type & Actual Amount)			Income: type and amount. If "None (or less than \$201)" is checked, no other entry is needed in Block C for that item.	rage Number
										Date (Mo., Day, Yr.) Only if Honoraria			01)" is item.	Φ

٥	(20	7	۵	U1	4.	_ل ى	2	I					OF 28
Line intentionally left blank.	(Value not readily ascertainable)	Random House, NY, NY - Book Royalties - Audacity of Hope	(Value not readily ascertainable)	(Abridged version for young adults) - See Attachment A for related information.	Dystel & Goderich, NY, NY - Book Royalties from Crown Publishing - Dreams from My Father	(Value not readily ascertainable)	Dystel & Goderich, NY, NY - Book Royalties from Crown Publishing - Dreams from My Father	JPMorgan Chase Checking Account (S)			BLOCK A	Assets and Income	Reporting Individual's Name Obama, Barack H.
									None (or less than \$1,001)				
						-		×	\$1,001 - \$15,000			بع	
									\$15,001 - \$50,000			Valuation of Assets at close of reporting period	
				1					\$50,001 - \$100,000			alu ose	
									\$100,001 - \$250,000			Valuation of Assets close of reporting peri	
									\$250,001 ~ \$500,000		BLOCK B	lon	
									\$500,001 - \$1,000,000		CK B	ort	
									Over \$1,000,000*			ing	S
									\$1,000,001 - \$5,000,000			pe	C
									\$5,000,001 - \$25,000,000			rio	H
		1.							\$25,000,001 - \$50,000,000		1	₽.	(g) B
									Over \$50,000,000				e d
									Excepted Investment Fund				(Use only
									Excepted Trust				1 4
									Qualified Trust				ne
									Dividends	J.,		CH H	A continued if needed)
		×					×		Rent and Royalties	Туре		Income: checked,	nti: ed)
				\perp					Interest	100		me (ed	nu pu
									Capital Gains			B.J.	lec
					×			×	None (or less than \$201)			/pe ot	1
_					<u> </u>				\$201 - \$1,000	4		her	
		<u> </u>			<u> </u>				\$1,001 - \$2,500	4		type and amount. If "None no other entry is needed in	
			<u> </u>	<u> </u>				-	\$2,501 - \$5,000	_	BLC	Try mo	
	 								\$5,001 - \$15,000	-	BLOCK C	is	
				_			<u> </u>		\$15,001 - \$50,000	- A	ρ.	, If nee	
		×					↓	-	\$50,001 - \$100,000	Amount		dec "N	
		ļ					×		\$100,001 - \$1,000,000	15		ni t	
							_		Over \$1,000,000*	-\"		BE (6)	
									\$1,000,001 - \$5,000,000	4		(or less Block C	
									Over \$5,000,000			C	12
									Other Income (Spectfy Type & Actual Amount)			Income: type and amount. If "None (or less than \$201)" ichecked, no other entry is needed in Block C for that item.	4 of
									Date (Mo., Day, Yr.) Only if Honoraria)1)" is item.	α

	- 0	00	7	9	υ 1	4	(M	2	-					2	, p
* This category applies only if the asset/income is solely that of the filer's spouse or dependent children. If the by the filer with the spouse or dependent children, mark the other higher categories of value, as appropriate.	Park Foundation.	*All rights to intellectual property and income from American Grown held by National	2012) (S) (Value not readily ascertainable)	Crown Publishing, NY, NY - Book contract for American Grown* (forthcoming publication May	(Value not readily ascertainable)	Odds: Village Industry in Indonesia by S. Ann Dunham (Inheritance from S. Ann Dunham)	Duke University Press, Durham, NC - Royalties from Duke Publishing - Surviving Against the	Attachment A for related information. (Value not readily ascertainable)	Random House, NY, NY - Book Royalties - Of Thee I Sing: A Letter to My Daughters - See			BLOCK A	Assets and Income	Obama, Barack H.	Reporting Individual's Name
e is s ildre		_			-					None (or less than \$1,001)					
olely n, m										\$1,001 - \$15,000			مع		
y tha					-					\$15,001 - \$50,000			2<		
at of the										\$50,001 - \$100,000			alu ose		
the			†							\$100,001 - \$250,000			Valuation of Assets at close of reporting period		
file r hi										\$250,001 - \$500,000		BLO	ref		
ghe r's s										\$500,001 - \$1,000,000		BLOCK B	orn		
pou cal										Over \$1,000,000*		J	ing KA'i	1	
se o										\$1,000,001 - \$5,000,000			sse		S
r de ries			 							\$5,000,001 - \$25,000,000			ts		Ħ
pen of v										\$25,000,001 - \$50,000,000			ğ.	(a	H
dent alue										Over \$50,000,000				se	2
chi										Excepted Investment Fund				Use only if needed)	SCHEDULE
ldre app			1					<u> </u>	1	Excepted Trust		1		[V]	
n. I							1	†		Qualified Trust		1		fn	
f the										Dividends			0.55	eec	0
If the asset/income is either that of the filer or jointly held priate.							×		×	Rent and Royalties	Туре		Income: checked,	led	continued
et/i										Interest	pe		kec		<u>=</u>
ncoı										Capital Gains	1		1, n		ue
me i										None (or less than \$201)	T		o o		Ω
s eit			1				×		1	\$201 - \$1,000	1		e ar		
her										\$1,001 - \$2,500	1		nd :		
that			†	-			1			\$2,501 - \$5,000	1	BI	ntr		
of t							—	†	İ	\$5,001 - \$15,000		BLOCK C	our y is		
he f										\$15,001 - \$50,000	1⊳	ြင်	ne It. I		
ller		1								\$50,001 - \$100,000	B		f "}		
or j	-×-								×	\$100,001 - \$1,000,000	Amount		type and amount. If "None no other entry is needed in		
oint			 -			1		\vdash		Over \$1,000,000*	7#		ne (
्रम श										\$1,000,001 - \$5,000,000			log of		
eld										Over \$5,000,000	100		(or less Block C		, T
										Other Income (Specify Type & Actual Amount)			Income: type and amount. If "None (or less than \$201)" ichecked, no other entry is needed in Block C for that item.	5 of	Page Number
										Date (Mo., Day, Yr.) Only if Honoraria			01)" is item.	8	

7	ŧл	4	w	2	Н			I a h	1 D. C	₹ Z Ho	오코
						Example Central Airlines Common	Identification of Assets	futures, and other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss.	children during the reporting period of any	Part I: Transactions Report any purchase, sale, or exchange hy your spouse, or dependent	Reporting Individual's Name Obama, Barack H.
							on of Assets	Check the "Certificate of divestiture" block to indicate sales made pursuant to a certificate of divestiture from OGE.	residence, or a transaction solely between you, your spouse, or dependent child.	Do not report a transaction involving property used solely as your personal	SCHEDULE B
						×	P	urchase	ŢŢ,	Non	Ĭ.
	Г					T	s	ale	Transaction Type (x)	None 🗙	H
							E	xchange	x) mon		
	,					2/1/99		Date (Mo., Day, Yr.)			
								1,001 ~ 15,000	T		
	L		L	L	L		\$	15,001 - 50,000			
	L					×	\$	50,001 - 100,000			
	L		_			L	\$.	100,001 - 250,000 250,001 -	Amo		
	<u> </u>	_		L		L	\$	500,001 -	Junii c		
	_	_	_			-	\$	1,000,000 ver	of Tra		
	_	_	_	_			\$	1,000,000*	Amount of Transaction (x)		age N
	_	_				-	\$	5,000,000	ion (age Number 6
	<u> </u>					-	. \$	25,000,001 25,000,000 25,000,001			of er
	-					-	\$:	ver	-		ω
	_	_				\vdash	\$	50,000,000 ertificate of			
					l			ivestiture			

^{*}This category applies only if the underlying asset is solely that of the filer's spouse or dependent children. If the underlying asset is either held by the filer or jointly held by the filer with the spouse or dependent children, use the other higher categories of value, as appropriate.

Part II: Gifts, Reimbursements, and Travel Expenses

For you, your spouse and dependent children, report the source, a brief description, and the value of: (1) gifts (such as tangible items, transportation, lodging, food, or entertainment) received from one source totaling more than \$350 and (2) travel-related cash reimbursements received from one source totaling more than \$350. For conflicts analysis, it is helpful to indicate a basis for receipt, such as personal friend, agency approval under 5 U.S.C. § 4111 or other statutory authority, etc. For travel-related gifts and reimbursements, include travel itinerary, dates, and the nature of expenses provided. Exclude anything given to you by

the U.S. Government; given to your agency in connection with official travel; received from relatives; received by your spouse or dependent child totally independent of their relationship to you; or provided as personal hospitality at the donor's residence. Also, for purposes of aggregating gifts to determine the total value from one source, exclude items worth \$140 or less. See instructions for other exclusions.

None X

Uτ	4	(μ)	2	1			
5	4	ω.	2	1	Frank Jones, San Francisco, CA	Nat'l Assn. of Rock Collectors, NY, NY	Source (Name and Address)
					Leather briefcase (personal friend)	Airline ticket, hotel room & meals incident to national conference 6/15/99 (personal activity unrelated to duty)	Brief Description
					\$385	\$500	Value

U.S. Office of Government Ethics Reporting Individual's Name									Pa	Page Number	aber		
Obama, Barack H.	Si	SCHEDULE C	JLE C							(7 of	8	
Part I: Liabilities	a mortgage on your personal residence	None											
Report liabilities over \$10,000 owed to any one creditor at any time	unless it is rented out; loans secured by automobiles, household furniture						Category of Amount or Value	of Amo	unt or	Value	(x)		J '
during the reporting period by you, your spouse, or dependent children. Check the highest amount owed during the reporting period. Exclude	or appliances; and liabilities owed to certain relatives listed in instructions. See instructions for revolving charge accounts.	1		1	0,001 - 5,000 5,001 - 0,000	0,000 - 00,000	00,001- 50,000 50,001 ~	00,000		000,000*	000,000	5,000,000 5,000,001 - 0,000,000	.,500,000
Creditors (Name and Address)	Type of Liability	Incurred	Rate	applicable	\$15 \$15	\$50	\$25	\$50 \$50	Ove	\$1,	\$5,	\$25	1 400
4	Mortgage on rental property. Delaware	1991	8%	25 yrs.	-	×			\dashv				
Examples John Jones, Washington, DC	Promissory note	1999	10%	on demand	i			×		H	H	H	L
Northern Trust, Chicago, IL	Martgage on residence, Illinois	2005	5.625%	30 yrs.									<u> </u>
2								-		+		+	
3													
45						,							
Oi .													
*This category applies only if the liability is with the spouse or dependent children, mar	*This category applies only if the liability is solely that of the filer's spouse or dependent children. If the liability is that of the with the spouse or dependent children, mark the other higher categories, as appropriate.	iren. If the li	ability is th	at of the fi	filer or a joint liability of the filer	ıt liabillı	y of the	: filer					
Part II: Agreements or	or Arrangements												
Report your agreements or arrangements for: (1) continuing participation in an employee benefit plan (e.g. pension, 401k, deferred compensation); (2) continution of payment by a former employer (including severance payments); (3) leav	Report your agreements or arrangements for: (1) continuing participation in an employee benefit plan (e.g. pension, 401k, deferred compensation); (2) continuation of payment by a former employer (including severance payments); (3) leaves	of absen ing of n	of absence; and (4) future employment. See instructions regarding the reporting of negotiations for any of these arrangements or benefits. Non	future s s for any	employme of these a	ent See	instru nents	ctions or ben	rega lefits.	rding	the n	eport- None	6
Status and To	Status and Terms of any Agreement or Arrangement						Parties						Date
Example Pursuant to partnership agreement, calculated on service performed thr	Pursuant to partnership agreement, will receive lump sum payment of capital account & partnership share calculated on service performed through $1/00$.	artnership sh	are	Doe Jones	& Smith, Hometown, State	metown,	State						7/85
General Assembly Defined Benefit Pension Plan (no further contributions by former employer)	no further contributions by former employer)			State of Illinois,	ois, Springfield, IL	sid, IL						0	01/97
2													
ω,													1
4												-	1
\$													1
6													

J.S. Office of Government Ethics				
Reporting Individual's Name Obama, Barack H.		SCHEDULE D		Page Number 8 of 8
Part I: Positions Held Outside U.S. Government Report any positions held during the applicable reporting period, whether compensated or not. Positions include but are not limited to those of an officer, director, trustee, general partner, proprietor, representative, employee, or consultant of	Iside U.S. Governible reporting period, whether on ited to those of an officer, directive, employee, or consultant	ment compen- organization or educational institution. Exclude positions with religious social, fraternal, or political entities and those solely of an honorary nature.	nstitution. Exclude positions ntities and those solely of an h	with religious,
any corporation, firm, partnership, or other pushess effectivise of any non-prome	dusiness enter brise or any mon		7	-1
Organization (Name and Address)		pe of Organization	Position Heid	, YF.) 1
Nat'l Assn. of Roc		Non-profit education	President	
Examples Doe Jones & Smith, Hometown, State	La	Law firm	Partner	7/85 1/00
1				
2				
3				
4	no 2.			
5				
6				
Part II: Compensation in Excess of \$5,000 Paid by One Source Report sources of more than \$5,000 compensation received by you or your non-profit organization who business affiliation for services provided directly by you during any one year of services generating a fee or services generating g	Excess of \$5,000 sation received by you or your ectly by you during any one year of the received the received by the received by your during any one year.	lid	by One Source Incumbent, Termination Filer, or Vice you directly provided the services generating a fee or navment of more than \$5,000. You	part if you are an ion Filer, or Vice lential Candidate.
		Reiof	Brief Description of Dutles	
Doe Jones & Smith, Hometown, State	(COO)	Legal services		
Examples Metro University (Client of Doe Jones & Smith), Moneytown, State	Voneytown, State	Legal services in connection with university construction	tion	
1				
2				
ω,				
4.				
S				
\$				

ATTACHMENT A TO SCHEDULE A - ASSETS AND INCOME

On January 9, 2009, Barack Obama executed an amendment to his previously disclosed, December 2004 agreement with Crown Publishing Group, a division of Random House, Inc. Under this agreement, a non-fiction work, the subject to be determined, would not be delivered during his term in office and the schedule for any future book publications would be accordingly revised.

On January 15, 2009, Barack Obama approved a \$500,000 advance against royalties under an agreement between Crown Publishing Group, a division of Random House, Inc., and Random House Children's Books, for an abridged version of *Dreams From My Father* suitable for middle grade or young adult readers, as proposed by the publisher in 2008. The President received the last advance payment for the abridged version of *Dreams From My Father* in 2010. Royalties for the book are: 15% of the U.S. sales price for hardcover book sales, 7.5% to 10% of the U.S. price for trade paperback book sales, 10% for the U.S. price for the mass-market paperback book sales, and other standard royalties. The abridged, young adult version of *Dreams From My Father* will be prepared and released by the publisher subject to the President's approval.

Prior to taking office in January 2009, Barack Obama wrote and delivered the manuscript of *Of Thee I Sing*, a children's book. This book is part of his previously disclosed December 2004 agreements with Crown Publishing Group, a division of Random House, Inc. *Of Thee I Sing* was published in November 2010 and all after-tax, author proceeds from this book have been and will continue to be donated to the Fisher House Foundation for a scholarship fund for children of fallen and disabled soldiers.

Executive Branch Personnel PUBLIC FINANCIAL DISCLOSURE REPORT

Form Approved: OMB No. 3209 - 0001

Reservations (Indiana), Name Indiana), Name Indiana, Nam	OGE Use Only	continued on the reverse side)	(Check box if comments are continued	(C	annia hurre e staturanta de la Pilla
Incumbent Region Reporting Incumbent Converted by Region Converted a Region Converted by Region Converted by Region Converted a Region Converted by Region					
Inclument, Camelidate, Electrical, Rep port in g Status St	Use				
True continues Superating Encounter Calendar Year New Enterant New En	of filing.		extension granted & indic	(Check box if filing	
Incumbent Colordar Year Name Colordar Year Colordar Year Colordar Year Colordar Year Colordar Year Colordar Year Colordar Color	the preceding two calendar years and the current calendar year up to the dat		is sheet)	side	Officials
Incumbent Conditatory Elections Reporting Calendar Year New Internant, New Internant, Termination Transition Date (Mappile Internant) Calendar Year New Internant, Termination Conditions Converted by Report Candidate Termination Conditions Candidate Termination Conditions Candidate Termination Conditions Candidate Termination Conditions Candidate Candi	arrangements as of the date of filing. Schedule D.—The renorting perior	5/10/12		I Shart	Use Only
ment Candidacy Election, Reporting Castatus Control Procession Technology (If Applicable) (Inclinabent Control Procession Control Control Procession Control Control Control Procession Control Control Control Procession Control Control Control Procession Control Contro	Schedule C, Part 11 (Agreements or Arrangements)-Show any agreements or	Date (Month, Day, Year)		und	Government Ethics Sig
ment Candidacy, Election. Reporting Stratus Calendar Year Covered by Report 100min. Stratus Cicked Superportation	year and the current calendar year up to any date you choose that is within 31 days of the date of filing.		•	ent -	On the basis of information contained in this report, I conclude that the filer is in compliance with applicable laws and regulations (subject to any comments in the box below).
ment Candidacy, Election, Reporting Status Status (Check Appropriate Members) Status (Check Appropriate Members) Status (Check Appropriate Members) Check Appropriate Members (Check Dy Report Mominee, or Calendar Year Cabe) (Check Appropriate Mominee, or Calendar Year Calendar Year Cabe) (Check Appropriate Mominee, or Cabe) (Check Appropriate Members) Last Name Elast Name Elast Name and Middle Initial First Name and Middle Initial First Name and Middle Initial OF Title of Position VICE PRESIDENT Of Address (Number, Street, City, State, and ZIP Code) Paddress (Number, Street, City, State, and ZIP Code) WHITE HOUSE, 1600 PENNSYLVANIA AVE., NIV, WASHINGTON, DC 20500 Interest Subject Northing Indivigital Incomplete and orrect of Create a Qualified Diversified Trust? Vice State a Above) Signature of Reporting Indivigital Signature of Cother Reviewer Signature of Other Reviewer	reporting period is the preceding calendar	Date (Month, Day, Year)	ng Official	K	
ment Candidacy, Election Reporting Status St	Schedule B-Not applicable.	•		Les en S. Panh	agency)
Incumbent Calendar Year New Entrant, New Entrant New Entrant, New Entrant New Entrant, New Entrant New Entrant, New Entra	as of any date you choose that is w 31 days of the date of filing.	Date (Month, Day, Year)		upe of Other Reviewer $m{\mathcal{U}}$	
Incumbent Calendar Year New Entrant, New En	Schedule A-The reporting period for income (BLOCK C) is the preceding calendar year and the current calendar year up to the date of filing. Value assets	5.10.12		/K Bela //	I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge.
Reporting Incumbent Calendar Year New Entrant, Status	Vice President:	Date (Month, Day, Year)			Ш
Month Day, Year) Calendar Year New Entrant, Mominee, or Calendar Year Nominee, or Calendar Year Nominee, or Check Appropriate Execution Status Covered by Report Nominee, or Calendar Year Nominee, or Calendary Year Year	Nominees, New Entrants an	⊠ ₹	Yes	plicable	
Incumbent Calendar Year New Entrant, Nominee, or Status	at the date of termination. Part II of Schedule D is not applicable.	eate a Qualified Diversified Trust?	Do You Intend	of Congressional Committee Considering Nomina	-
ment, Candidacy, Election, Startus (Month, Day, Year) Startus (Check Appropriate Boxes) Last Name BIDEN Title of Position Of Of Of Gaddress) Address (Number, Street, City, State, and ZIP Code) WHITE HOUSE, 1600 PENNSYLVANIA AVE., NW, WASHINGTON, DC 20500 In artus Covered by Report Covered by Report Calendar Year Nominee, or Check Entrant, Cleek Intrant, Covered by Report Candidate First Name and Middle Initial Filer Street, City, State, and ZIP Code) Department or Agency (If Applicable) Telephone No. (Include Area Code) WHITE HOUSE, 1600 PENNSYLVANIA AVE., NW, WASHINGTON, DC 20500	Termination Filers: The report period begins at the end of the per covered by your previous filing an extended by your previous filing and the feature of the period of th			of Position(s) and Date(s) Held	<u> </u>
ment, Candidacy, Election, Status (Month, Day, Year) Reporting Status (Check Appropriate loxes) Reporting (Check Appropriate loxes) Reporting (Check Appropriate loxes) Reporting (Check Appropriate loxes) Reporting (Check Appropriate loxes) Reporting (Check Appropriate loxes) Reporting (Check Appropriate loxes) Reporting (Check Appropriate loxes) Reporting (Check Appropriate loxes) Reporting (Check Appropriate loxes) Reporting (Check Appropriate loxes) Rier Immation Termination Date (If Applicable) First Name and Middle Initial JOSEPH R., JR. Rew Entrant, Filer Immation Termination Date (If Applicable) First Name and Middle Initial Department or Agency (If Applicable) VICE PRESIDENT Rew Entrant, Filer Immation Termination Date (If Applicable) First Name and Middle Initial Department or Agency (If Applicable) Telephone No. (Include Area Code)	where you must also include the fi year up to the date you file. Part I Schedule D is not applicable.		SHINGTON, DC 20500	E HOUSE, 1600 PENNSYLVANIA AVE., NW, WAS	\$5)
ment, Candidacy, Election, Status (Month, Day, Year) Status (Check Appropriate Boxes) Last Name BIDEN Title of Position Title of Position Flor Which Calendar Year Covered by Report Covered by Report Covered by Report Candidate Covered by Report Candidate First Name and Middle Initial First Name and Middle Initial JOSEPH R., JR. Department or Agency (If Applicable)	If of Schedule C and Part I of Schedule C				
ment, Candidacy, Election, Status Status Covered by Report Covered by Report Covered by Report Candidate Covered by Report Candidate Covered by Report Candidate Covered by Report Candidate Candida	Reporting Periods Incumbents: The reporting peri			PRESIDENT	for Which
Reporting Incumbent Status (Check Appropriate Boxes) Last Name Incumbent Calendar Year Covered by Report Report Romant, (Check Appropriate Boxes) Incumbent Calendar Year Nominee, or Covered by Report Romandidate Incumbent Calendar Year Nominee, or Covered by Report Randidate Filer Covered by Report Randidate Filer Status Rame Status Rame and Middle Initial First Name and Middle Initial JOSEPH R., JR.	to a \$200 fee.	(If Ap)	Department or Age	f Position	
Reporting Incumbent Calendar Year Status (Check Appropriate Boxes) Last Name Calendar Year Covered by Report Report (Check Appropriate Boxes) Calendar Year Nominee, or Calendar Year Nominee, or Candidate Covered by Report Nominee, or Candidate Filer Cambie) (Month, Day, Year) First Name and Middle Initial	than 30 days after the last day of t filing extension period, shall be sul	1	JOSEPH R., JR.		l's Name
Reporting Incumbent Calendar Year Status Covered by Report (Check Appropriate Report Boxes) Calendar Year New Entrant, New Entrant, Nominee, or Candidate Covered by Report Candidate Reporting Calendar Year New Entrant, Covered by Report Covered by Report Candidate Covered by Report Candidate Candidate Candidate	filed, or, if an extension is granted,	idle Initial	First Name and Mic	ame	
Reporting Incumbent Calendar Year New Entrant, Termination Termination Date (If Appli-	Any individual who is required this report and does so more than			riate	-
	Fee for Late Filing	ination]	Incumbent	

6	٧.	4	3	2	<u> </u>			Û		Prince Win in a rectification of the rectification	re Fo			<u> </u>	
S - WILMI SAVINGS	S - WILMING	MTIM 8W - r	M&T E	SUNT	J - UN CRED			Examples		production of value exceeding period, or in income du with such income du with such income of report the sour income of mo actual amour your spouse). None	For you, you report each			I Z	Reporti
- WILMINGTON SAVINGS FUND AVINGS	- WILMINGTON SAVINGS FUND SOCIETY - HECKING	J - M&T BANK - CHECKING (formerly WILMINGTON TRUST)	M&T BANK - CHECKING (formerly WILMINGTON TRUST)	SUNTRUST BANK - CHECKING	J - UNITED STATES SENATE FE	IRA: Heartland 500 Index Fund	Kempstone Equity Fund	S Doe Jones & Smith, Hometown, State	Central Airlines Common	f income was fing \$1,000 a which gen which gen ing the reporting the report also report ned income. U.S. Govern Tree but no rectan \$1 tree than \$1	r spouse, an asset held	BLOCK A	Assets and Income	BICHN, JOSEPH X., JX.	Reporting Individual's Name
ID SOCIETY -	D SOCIETY -	легіу	У		FEDERAL	nd	 	,State	 	a fair market soft the report- ore than \$200 riod, together ce and actual ag \$200 (other ryour spouse, unt of earned ept report the over \$200 of	and dependent children, ld for investment or the		ne		
		X		X	1000	191		744	0/17	None (or less than \$1,001)				İ	
×	×		×		×		<u> </u>	<u> </u>]	\$1,001 - \$15,000	tarenti urkila mili erles		at		
				1				×	Î	\$15,001 - \$50,000	3		ਹੁ≲		
									×	\$50,001 - \$100,000]	alu ose		
	1, 80	. , ,	33	31/18	125	1	×			+\$100,001 - \$250,000] _E	Valuation of Assets at close of reporting period		
										\$250,001 - \$500,000		вгоск в	rep P		
1111 11113 E	\$ 2	1.5	1,214	1- 1-	1-114,	×			$\times 7^{\frac{1}{2}}$		Ī, to .	£	orti		
							 	 	 	Over \$1,000,000*			As	1	
			-	1	1 \ \disp.	×	! 	! 		\$1,000,001 - \$5,000,000			set per		
							<u></u>	<u></u>	<u> </u>	\$5,000,001 - \$25,000,000			rioc		
136	(50)	(Marky)	3 5 W	1) Bet	100	10.12		- 1	150	\$25,000,001 - \$50,000,000	-				2
			- 2500 MB - 247 - 111				Ĺ	<u> </u>	Ĺ	Over \$50,000,000					.) T!
* #	555 C	17.78	jiana je	×		×	×	7	64	Excepted Investment Fund				ļį	
							<u> </u>			Excepted Trust					SCHEDIILE
							- Inches			Qualified Trust	(4.). April 100				=
									×	Dividends	ال		Ch	1	
	2, 4	J. W.	, i	177	t in	420	. 25		180.00	Rent and Royalties	Туре		eck CO	;	\triangleright
W. T.	. 151 7						! 	! 	┢	Interest	Įĕ.		Income: t		
初点机			W.				! [! 		Capital Gains	on testimone	4	\rightarrow \leftarrow 1		
×	×	×	×	×	×		<u>i</u>		Ĺ	None (or less than \$201)	-		type and amount. If "None no other entry is needed in		
<u> </u>		1)1	,	11 1	100	1953	1.45	-	44.	\$201 - \$1,000	-		anc		
	1 2 2	302	t redesti	-111			Ļ		Ļ×	\$1,001 - \$2,500	-		1 ar		
4) NO	$\pi_1 : \mathcal{U}^{\mathcal{H}}$	4 4400	3 4 (1)	#, ×			×			\$2,501 - \$5,000	4	BLO	וא מין		
0.01	×					×	<u> </u>			\$5,001 - \$15,000 \$15,001 - \$50,000	-	BLOCK C	is n	Ī	
					+(2.)	lt-	-			\$50,001 - \$100,000	ן≽		eec H,		
		1 - 0.1	DATE X	1111/60	15,34,707	18	70	120	200	\$100,001 - \$1,000,000	Amount		led 'No		
ļ		3,0	'	141 1111			-	 	1	Over \$1,000,000*	45		ne in		
41	4.5	1116	12/14/	3,2 0		 	 	 	 	\$1,000,001 - \$5,000,000	┨ [~]		(or less Block C		
	1=12		is				 	 	 	Over \$5,000,000	1		ck (75
							 	Law Partnership Income \$130,000	 	Other Income (Specify Type & Actual Amount)			ype and amount. If "None (or less than \$201)" is o other entry is needed in Block C for that item.	2 of	Page Number
							 	 	1 	Date (Mo., Day, Yr.) Only if Honoraria)" is em.	10	

1	Co. Carros of Covering Sunes												ĺ																			٠,		
m	Reporting Individual's Name BIDEN, JOSEPH R., JR.									S	CI) HE	D Us	U)	CHEDULE (Use only	A if:	ne ne	EDULE A continued Use only if needed)	tiı ed)	nt	.ec	,										Page	Page Number 3 of 1	10
	Assets and Income			at	Va Clo	lua se c	Valuation of Assets at close of reporting period	epc m	of.	ng Ass	per	iod						다. 대선	Income: checked,	me ed,	no ty	type and amount. If "None no other entry is needed in	anc	en	not	int.	leer If	ded.	in	BC (OI	(or less Block C	SS t	type and amount. If "None (or less than \$201)" is no other entry is needed in Block C for that item.	1)" is
	BLOCK A						B	BLOCK B	K B																BLO	BLOCK C	. ,							
T			16.5						1 +		15,00		1.5		14		* 1	┦ᆲ┃	Type	- e		_			1	-	┦ ╬┃	Amount	ᆜ┋╽	-	-			
									The state of the s				- \$50,000,000				ist !-	1.1	alties						···		1 - 12					**************************************	< ()	Date (Mo., Day, Yr.)
			None (or less t	\$1,001 - \$15,0	\$15,001 - \$50	\$50,001 - \$10	\$100,001 - \$2	\$250,001 - \$5	\$500,001 - \$1,	Over \$1,000,0	\$1,000,001 - \$	\$5,000,001 - \$		Over \$50,000,	Excepted Inves	Excepted Trus	Qualified Trus	Dividends	Rent and Roya	Interest	Capital Gains	None (or less t	\$201 - \$1,000	\$1,001 - \$2,50	\$2,501 - \$5,00	\$5,001 - \$15,0 \$15,001 - \$50,	\$50,001 - \$30,		\$100,001 - \$1,	Over \$1,000,0	\$1,000,001 - \$	Over \$5,000,0	Actual Amount)	Only if Honoraria
- 1	S - DEFERRED COMP STATE OF DE, FIDELITY FREEDOM 2020 FUND				×	1 . 1	(1)(1)	Ni 10	o it sijn						×					-X-		-	(90.5	×	+ 0 4	No.	3.2.	. ×	'	1 1				
2	S - TAX-SHELTERED ANNUITY, SECURITY BENEFIT GROUP, INVESTED AS FOLLOWS:				-		el Cong	A. (1)		5 95	41111n		1)		Σ .											r 5.	1- 30-	729	= ' ''-	-196 -	27.2			
w	1) INVESCO VI GLOBAL HEALTH CARE			×		, -	-27		200 14	rati ti	My. 1	1 2 10	111		×		8" XX"-		<u> </u>			×		11. 3	Α	No ten	7	10586	top Fee	45	/"\h. =			
4	2) INVESCO VI INTERNATIONAL GROWTH			×		- 32	120	1.0	1.740	×		a Francis	Th.		×		THE WA					×					'	A . 17	plant to	71,121	i bayêr			
5	3) DREYFUS IP TECHNOLOGY GROWTH	RESIDENCE AND ADDRESS OF THE PARTY OF THE PA		×			-41		31.14				-		×		-3 4-	_				×						and the	121 180	15.	100			
6	4) GUGGENHEIM INVESTMENTS HIGH YIELD (formerly RYDEX SGI VT HIGH YIELD)	Ö		×		- 1.4	(A) (A)		17/21		#11 11		111		×			+ 0	,			×						0.74	1,700	71.75	138 (10)			
7	5) JANUS ASPEN ENTERPRISE			×			1	10.00	11.1	7,17	186	10	9 4		×			0.0000	20,245,7		11 1	×						. 10		13.1				
œ	6) JANUS ASPEN JANUS PORTFOLIO			×			1		188	1.0	7.1	10.0	(i)	100	×	James Marie	j. 447 j.		* 1, 20	S. 1	11	X	1						+					
9	7) LEGG MASON WESTERN ASSET VARIABLE GLOBAL HIGH YIELD BOND			×				,	1		\$ 132		1. 2		× ±		ā lini	nt al to	10.79	stables.	100	×	3.11	. 4.1	-X-1									
	* This category applies only if the asset/income is solely that of the filer's spouse or dependent children. If the by the filer with the spouse or dependent children, mark the other higher categories of value, as appropriate.	ne is hildı	cen,	ely t	hat k th	of the ot	ne fi her	ler's high	spc	use	or c	lepe s of	nde valı	nt c	hild: us ap	ren. pro	If t pria	If the asset/income is either that of the filer or jointly held priate.	sset	/inc	ome	ise	ithe	r th	at of	the	file	r or	join	dy i	neld			

	9	8	7	6	5	4	ω	2	1		ALCOHOLD STREET			T 771	edition.
H								ļ							Rep
	J - WILMINGTON SAVINGS FUND SOCIETY	S - DE STATE PENSION, DEFINED B PLAN (value not readily ascertainable)	S - TD BANK - CHECKING	CONTINUATION OF LINE 5 (value not readily ascertainable)	RANDOM HOUSE PUBLISHERS, NY, NY BOOK TITLE - "PROMISES TO KEEP"	11) Guggenheim Investments Small Cap Value (formerly RYDEX SGI VT SMALL CAP VALUE)	10) Guggenheim Investments Mid Cap Value (formerly RYDEX SGI VT MID CAP VALUE)	9) Guggenheim Investments Mid Cap Growth (formerly RYDEX SGI VT MID CAP GROWTH)	8) MFS VIT UTILITIES					BIDEN, JOSEPH R., JR.	Reporting Individual's Name
3		- DE STATE PENSION, DEFINED BENEFIT LAN (value not readily ascertainable)	D B/	TINI tain:	± 5 1 ≥ 5	iugg erly	iugg erly	gger erly l	S <				ъ	ISOI	ig In
ľ	" NG	ΓΑΤΙ ilue	Ž	JAT able	류	RY(RYEST.	nhei RYC	ΠU				Assets	꿈	INID
	힣	not	- 0	ÿ	gu.	X Bir	Σ Bir	X =	TL.				ets	,P	unau
	AS I	ENS	尚	유	Ř P P	Inve	Inve	sGI	TES			BLC	and	کے	N
	\S	ily a	Ž	Ξ	NISI JBL	stm	Stm	tme _I	(1)			BLOCK A	1d		E
	GS	, DE	ഹ	E 5 (IS I	ents SM.	ents MID	Mis N				≻	Income		
	Š	tain		(valu	O'B'	ALL Sm	Ç ≦i	CA					010		
	D S	ED E		le no	H N	CA AFC	Car P <√	P GF					ne		
	요) BE)t rea	**- **- **-	ap \	V Ya	Grov							
	₹	핔		adily		LUE LUE	U le	H, H,							
	1	,								N (1 d1 001)					
L	<u></u>					~			×	None (or less than \$1,001) \$1,001 - \$15,000	- ×				
L	×	151 11	×		71.1	×	×	×	X	\$15,001 - \$50,000			at o		
H		200 7	1 1000	1 - 1	_(M _{1,0} *	516, H).	11,750	3 3 -	1,0	\$50,001 - \$100,000			Val		
17	i yex				1				7 - 0	\$100,001 - \$250,000	-17Y		ua e o		
_									100 .2	\$250,001 - \$500,000	- 1- 1	BL	fre		
_			ļ				- 30	1 1 1 1		\$500,001 - \$1,000,000		BLOCK B	po		
L					ļ					Over \$1,000,000*		B	rtin		
_	3	20 75%	F = 1/0	=1 112	*W 11		y.		. Y 119/	\$1,000,001 - \$5,000,000	Wari		Valuation of Assets at close of reporting period	S)
_	,	,,,-	- 100	20051	Υ	You'l	1) (10		\$5,000,001 - \$25,000,000	- 0.11		ets eri		
-	70 to	8 0-01						_		\$25,000,001 - \$25,000,000			od		
H	· 11									Over \$50,000,000]se	1
						×	×	×	×	Excepted Investment Fund	v k			CHEDULE A conti	1
-				<u> </u>				,	7,	Excepted Trust			1	TY.	
	14	10,5	ā jag	6.3	35 to 1		4- W F		1000	Qualified Trust				if n	
-										Dividends			C II	continue eeded)	
	out?									Rent and Royalties	Typ		Income: I	led int	
l										Interest	рe		kec		
l			٨-	= -	3.1	4877	3. 8	100	- 1	Capital Gains			f, e: t	1e	
	×		×		×	×	×	×	×	None (or less than \$201)			o ype	φ.	L
	1	4	-37	17. 8	12/12					\$201 - \$1,000			e ar the		
										\$1,001 - \$2,500			r er		
1	7 . !					18 =	. 480	12.4	18 M P	\$2,501 - \$5,000		BL	î Î		
Ĺ										\$5,001 - \$15,000		BLOCK C	un is		
Ĺ		1, 45, 1	W.	44	1000					\$15,001 - \$50,000	\\P	С	t. If		
Ĺ										\$50,001 - \$100,000	Amount		type and amount. If "None 10 other entry is needed in		
	: Ye	1.0				,	4° - 1		$_{\rm H}$ \times $\%$	\$100,001 - \$1,000,000	d n		on(
L										Over \$1,000,000*	1		1 BI		
200	\$ + j	X				9.8	100	1	h wi	\$1,000,001 - \$5,000,000			(or less Block C		
		X					erin ricumanum and			Over \$5,000,000			SSS		2 - 0
		PENSION PYMT Spouse \$31,995								Inc (St Ty Am			tha		rage manner
l		SION T Spo								Other Income (Specify Type & Actual Amount)			th &	4	
		use											than \$201)" for that item		;
			di.		1			Fil		о о Гон Гон Гон Гон Гон Гон Гон Гон Гон			Income: type and amount. If "None (or less than \$201)" ichecked, no other entry is needed in Block C for that item.	10	
										Date (Mo., Day, Yr.) Only if Honoraria			is n.		
ı)ay					

Reporting Individual's Name			the state of the s	
BIDEN, JOSEPH R., JR.	SCHEDULE A conti	nue	đ	Page Number 5 of 10
Assets and Income Valuat at close of	Valuation of Assets at close of reporting period	Income: t	Income: type and amount. If "None (or less than \$201)" ichecked, no other entry is needed in Block C for that item.	(or less than \$201)" is Block C for that item.
BLOCK A	BLOCK B		BLOCK C	
· ~	· , ,	Type	Amount	
\$50,000	- \$500,000 - \$1,000,000 00,000* 1 - \$5,000,000 1 - \$25,000,000 01 - \$50,000,000 000,000 nvestment Fund	Royalties	2,500 5,000 15,000 \$50,000 \$100,000 - \$1,000,000	
\$1,001 - \$ \$15,001 - \$50,001 -	\$250,001 \$500,001 Over \$1,0 \$1,000,00 \$5,000,00 \$25,000,0 Over \$50,	Dividend	\$201 - \$1 \$1,001 - \$ \$2,501 - \$ \$5,001 - \$ \$15,001 - \$50,001 - \$100,001 Over \$1,0	\$1,000,00 Over \$5,0
1 MASS MUTUAL WHOLE LIFE INSURANCE X		×	×	
2 MASS MUTUAL WHOLE LIFE INSURANCE X		×	×	
3 MASS MUTUAL WHOLE LIFE INSURANCE X		×	×	
4 MASS MUTUAL WHOLE LIFE INSURANCE X		×	×	
S MASS MUTUAL WHOLE LIFE INSURANCE X	1 97 2 97 2 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	×	×	
6 MASS MUTUAL WHOLE LIFE INSURANCE X		×	×	
7 S - NEW CASTLE COUNTY SCHOOLS X EMPLOYEE FCU - SAVINGS			×	
		\$ (A)	×	
S - NEW CASTLE COUNTY SCHOOLS X				TEACHING

ن	∞	7	6	5	4	ω	2	ш					В
			M&T BANK - SAVINGS (CASH ACCOUNT) (formerly WILMINGTON TRUST)	J - RENTAL PROPERTY (residential), WILMINGTON, DE	S - WILMINGTON SAVINGS FUND SOCIETY - CERTIFICATES OF DEPOSIT	S - COMMONWEALTH OF VA, 401(a) MATCH PLAN - Balanced Growth Fund	S - COMMONWEALTH OF VA, A COMP Balanced Growth Fund	S - WILMINGTON SAVINGS FUND SOCIETY - CERTIFICATES OF DEPOSIT					BIDEN, JOSEPH R., JR.
			BANI erly \	ING.	TF M	COMMONWEALTH OF VA, 401(a) CASH TCH PLAN - Balanced Growth Fund	OMM	IFIC.				>	OSE
			NE S	TON	ATE	¥ SN	ONV	ATE				Assets	무 모
			NO X	유유	SON	- Ba	VE A	S OF			B	ts:	٦, ٦
			T OF NGS	图	SAV	LTH	Groon T.H.	SAVI			BLOCK A	ano	7, ا
			4 2 3 4 6	~	POG	8 Q	출유	Pog			K A	d Ir	
			LSU	eside	SH SH	Fow XA	und A	芦끄				100	
) A	ntia	R	# 401 # 71	457	ND (and Income	
			Ŝ	ي ا	Soc	a) C	DEFI	300					
]		HETY I	ASH	- COMMONWEALTH OF VA, 457 DEFERRE OMP Balanced Growth Fund	시크					
			×		'	×	Ü	1	None (or less than \$1,001)				
							×		\$1,001 - \$15,000			يو	
n . *	, 2 k	1.20) <u>-</u> -\	. 5	190	1,34	3 4 5	Ungar.	\$15,001 - \$50,000	- ,		T C <	
					×			×	\$50,001 - \$100,000			Valuation of Assets at close of reporting period	
	1 (1)	7 Y		×					\$100,001 - \$250,000	- 1		of	
									\$250,001 - \$500,000		BLO	ion rep	
						-	445		\$500,001 - \$1,000,000		BLOCK B	ort of	
									Over \$1,000,000*] "	As	
17.79	71	A B	15/4	· 7.6	×11 - 7	1,4			\$1,000,001 - \$5,000,000	1 1		se1	
									\$5,000,001 - \$25,000,000]	rio	_ 브
						1	5-8	-/	\$25,000,001 - \$50,000,000			2.	
									Over \$50,000,000	in the same of the same of the same of the same of the same of the same of the same of the same of the same of		***************************************	e C
- 15 m	70	O William	* 2	No 3	-0.00	X	: ×		Excepted Investment Fund	'	1		(Use only if needed)
	de la la								Excepted Trust				if A
	Ž!					Dy-series beauty and page		740	Qualified Trust	-			ne
			ļ		Jim				Dividends	۱,,		Che	(continue
		-	-50 -	×	×	20.00		×	Rent and Royalties Interest	Type		Income: checked,	(a) E
A-1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	150a. E.	1958	121.0 -	-	<u>├</u> ^		-	171-	Capital Gains	٩.		d,	
	dra 10		×	-		×	×	0.75	None (or less than \$201)	-		no	1 5
			 ^		,	, in (,	0.		\$201 - \$1,000	1		oth	
				-	×		-	×	\$1,001 - \$2,500			nd er e	
V. l.	1 - m/2	Him. T.	Nº	\$13 ×	-		5(1)	. 3	\$2,501 - \$5,000		B	am	
9-13									\$5,001 - \$15,000	1	BLOCK C	our y is	
	- 1			×	1 138	- 11 · 17	\$4,50°	×	\$15,001 - \$50,000	٦,	°C	nt. I	
									\$50,001 - \$100,000	1 💆		ede	
50 5-708	+ 5	F. 1	1000			1.8	17/28	1961-1	\$100,001 - \$1,000,000	Amount		type and amount. If "None no other entry is needed in	
									Over \$1,000,000*] =		e (c	
		1				800	Ϋ́ = .		\$1,000,001 - \$5,000,000			(or less Block C	
									Over \$5,000,000			ess c C	
									Other Income (Specify Type & Actual Amount)			Income: type and amount. If "None (or less than \$201)" is checked, no other entry is needed in Block C for that item.	6 of
										<u> </u>		201)" i t item.	of 10
									Date (Mo., Day, Yr.) Only if Honoraria	X20000000		S	

Do not complete Schedule B if you are a new entrant, nominee, or Vice Presidential or Presidential Candidate

U.S	U.S. Office of Government Ethics							İ		ĺ			١	ı	ı		N. Control	
BI R	Reporting Individual's Name BIDEN, JOSEPH R., JR.	SCHEDULE	ULE	B								Pa	Page Number 7		9,	10		
7 7 1	S Inge	Do not report a transaction involving	None X															
0.0	ny	residence, or a transaction solely between von vour spouse, or dependent child.	Transaction Type (x)	action (x)		T			¬ ₽	noun	t of	Tran	Amount of Transaction	<u>ा</u> छ ।		il		
l a fr	futures, and other securities when the amount of the transaction exceeded \$1,000. to Include transactions that resulted in a loss.	Check the "Certificate of divestiture" block to indicate sales made pursuant to a certificate of divestiture from OGE.	irchase ile	change	Date (Mo., Day, Yr.)	,001 - 5,000	5,001 - 0,000	0,001 - 00,000	00,001 - 50,000	250,001 - 300,000	500,001 -	/er	,000,000* .,000,001 -	5,000,001 - 25,000,000	5,000,000 5,000,000 0,000,000	ver	o,000,000 ertificate of	vestiture
	Identification of Assets	Assets	1	-		\$:	\$: \$:	\$: \$:	\$	\$:	\$	0	s	\$	\$2	10	С	
	Example Central Airlines Common		×	ili)	2/1/99	×		×		1,2		80	H	t			-	
,_				 58%		149		1		1,7				100	- 1.			
2				velte.				7.				ratio					BOTTLE PERSONNEL WA	
ω			Sin.	(1) <u>(1)</u>		ġŦ.		-11				216						on the second second
4		and the second s	1	100		18)		1				73		3 3			- 1	L
S						Ď.		(ju)		N.		1 64	***	174.				Acres de la constante de la co
h.	Part II: Gifts, Reimbursements, and Iravel I For you, your spouse and dependent children, report the source, a brief description, and the value of: (1) gifts (such as tangible items, transportation, lodging, food, or entertainment) received from one source totaling more than \$350 and (2) travel-related cash reimbursements received from one source totaling more than \$350. For conflicts analysis, it is helpful to indicate a basis for receipt, such as personal friend, agency approval under 5 U.S.C. § 4111 or other statutory authority, etc. For travel-related gifts and reimbursements, include travel itinerary, dates, and the nature of expenses provided. Exclude anything given to you by	1 EXP (- : :h :ary,	the U.S. Government; greceived from relatives independent of their relative denor's residence. A total value from one so for other exclusions.	nment; relative their r idence. n one s sions.	the U.S. Government; given to your agency in connection with official travel; received from relatives; received by your spouse or dependent child totally independent of their relationship to you; or provided as personal hospitality at the donor's residence. Also, for purposes of aggregating gifts to determine the total value from one source, exclude items worth \$140 or less. See instructions for other exclusions. None	our ago by your to your by your by your by your by your by your by your bulled by he was a surface of the bulled by the bulled by the bulled by your bulled	genci our s u; or ses o	y in opous pous pro f agg wor	conr ie or vide th \$	necti dep d as ating 140	on v end pers gif gif or le	vith ent of sona ts to ts.	offici child i l hosp deter See in	al tr total oital min stru	avel; ly ity at le the ctions	[]		
T	Source (Name and Address)		Brie	Brief Description	ption											Value	ie	
	Examples Nat'l Assn. of Rock Collectors, NY, NY	Airline ticket, hotel room & meals incident to national conference 6/15,	1 confere	nce 6/15	s/99 (personal activity unrelated to duty)	al activ	ity uz	relat	ed to	duty	ات	1.		1		\$500		1
-		Learner prietrase (personal trienu)		1						ļ				ď	9	0	1	
2	Keijo Paajanen (Helsinki, Finland)	Vulcain Cricket Watch		M									11		\$	\$800		
ω																		
4																		
Ç																		

5 C.F.R. Part 2634 U.S. Office of Government Ethics																
Reporting Individual's Name BIDEN, JOSEPH R., JR.	SC	SCHEDULE C	JLE C								Pag	Page Number 8		of 10		
Part I: Liabilities	a mortgage on your personal residence	None 🔲		_												
to any one creditor at any time	automobiles, household furniture							Catego	ry of	Amou	Category of Amount or Value	Value	×			
during the reporting period by you,	or appliances; and liabilities owed to								ē.				-	1 -		0
Check the highest amount owed during the reporting period. Exclude	See instructions for revolving charge accounts.				,001 - ,000	,001 - ,000	,001 - 0,000	0,001- 0,000	0,001 - 0,000	0,001 -		000,001	000,000	,000,000,	,000,00	,000,00
Creditors (Name and Address)	Type of Liability	Date Incurred	Rate	applicable		\$15 \$50				\$50	Ove	\$1,	\$5,	\$25		
First District Bank, Washington, DC	Mortgage on rental property, Delaware	!	8%	25 yrs.		 	×	-			 	-		-		
John Jones, Washington, DC	Promissory note	1999		on demand			12		×		T	\vdash	\vdash	-	_	
1 J - US SENATE FEDERAL CREDIT UNION	SIGNATURE NOTE WITH MONTHLY PAYMENTS	2007	9.99%	5 YRS		X			8				ues):	***		
2 WILMINGTON SAVINGS FUND SOCIETY	LINE OF CREDIT	2008	7.5%	10 YRS		\times			Ŵ		4		19/4	1/4		***************************************
3 J - WILMINGTON SAVINGS FUND SOCIETY	HOME EQUITY LOC	2005	PRIME	10 YRS	1.7		3.	X			100					-
SUN NATIONAL BANK, DE	CO-SIGNER WITH SON ON LOC, RENEWABLE EVERY 2 YEARS	1989	PR+1	2 YRS	- 7	\times	1. The				-Arg	Z* *				
5 MASS MUTUAL LIFE INSURANCE COMPANY POLICIES BOUGHT BETWEEN 1969 and 1983	LOANS AGAINST CASH VALUE OF POLICIES	1983	5-8%	LIFE		\times					A.	1000				
*This category applies only if the liability is sol with the spouse or dependent children, mark i	*This category applies only if the liability is solely that of the filer's spouse or dependent children. If the liability is that of the filer or a joint liability of the filer with the spouse or dependent children, mark the other higher categories, as appropriate.	en. If the lia	bility is th	at of the fil	er or a	joint	liabi	ity of	the fi	ler						
Part II: Agreements or Arrangements	Arrangements															
Report your agreements or arrangements for: (1) continuing participation in an employee benefit plan (e.g. pension, 401k, deferred compensation); (2) continuation of payment by a former employer (including severance payments); (3) leaves	for: (1) continuing participation in an , deferred compensation); (2) continuacluding severance payments); (3) leaves	of absending of ne	of absence; and (4) futuing of negotiations for a) future e s for any	re employment. See instructions regarding the report- ny of these arrangements or benefits. Non	ymer se ar	ıt. Se rang	e inst emen	ructi ts or	ons i bene	regar Hits.	ding	the 1	oo. No	oort- None 🔀	
Status and Terr	Status and Terms of any Agreement or Arrangement							Parties	es						Date	(0
Example Pursuant to partnership agreement, wi calculated on service performed throu	Pursuant to partnership agreement, will receive lump sum payment of capital account & partnership share calculated on service performed through $1/00$.	tnership sha	re	Doe Jones	& Smith, Hometown, State	h, Hon	etow	, State	"						7/85	
j1																
2																
3														- terbine and a below		\$==\$\(\frac{1}{2}\)\(\frac{1}{2}\)
4																
5																
			_													

C.S. Office of Government Euros		Continue Con						Ì		100000000000000000000000000000000000000					
Reporting Individual's Name BIDEN, JOSEPH R., JR.	SC	SCHEDULE	JLE C								Pag	Page Number 9	9 of	10	The Market State Control
Part I: Liabilities Report liabilities over \$10,000 owed	a mortgage on your personal residence unless it is rented out; loans secured by	None 🗌						ate go	ر د د	Category of Amount or Value	0.7		(x)		
during the reporting period by you, your spouse, or dependent children. Check the highest amount owed during the reporting period. Exclude	automobiles, noisenoid rumiture or appliances; and liabilities owed to certain relatives listed in instructions. See instructions for revolving charge accounts.				,001 - ,000	,001 - ,000	,001 - 0,000	0,001- 0,000	0,001 - 0,000	0,001 - 000,000	r 000,000*	000,001-	000,000 - ,000,000	,000,001 -	r ,000,000
Creditors (Name and Address)	Type of Liability	Date Incurred	Rate	applicable			\$50 \$10	\$10 \$25		\$50	Ove	\$1,	\$5,	\$25	Ove \$50
- 1	Mortgage on rental property, Delaware	1991	8%	25 yrs.			_×		П			H	Ů,		
John Jones	Promissory note	1999		on demand	w.t				×	T	17	T	100		
1 J - WILMINGTON SAVINGS FUND SOCIETY	MORTGAGE ON PRINCIPAL RESIDENCE (INCLUDING RENTAL PROPERTY)	2010	4.625%	23 YRS					111	X	÷ 1		1.7.39		
2 J - WILMINGTON SAVINGS FUND SOCIETY	HOME EQUITY LOC	2011	5.25%	10 YRS		X					1,71		<u>.</u>		
3									- '		-1 >		×		
4			1						, 1						
51							6.4		0, 7			-12 1			300
*This category applies only if the liability is so with the spouse or dependent children, mark	*This category applies only if the liability is solely that of the filer's spouse or dependent children. If the liability is that of with the spouse or dependent children, mark the other higher categories, as appropriate.	en. If the lia	bility is th		the filer or a joint liability of the filer	ı joint	liabil	ity of	the fi	ler					
Part II: Agreements or	Arrangements														
Report your agreements or arrangements for: (1) continuing participation in an employee benefit plan (e.g. pension, 401k, deferred compensation); (2) continuation of payment by a former employer (including severance payments); (3) leaves	for: (1) continuing participation in an c, deferred compensation); (2) continua- cluding severance payments); (3) leaves	of absening of ne	of absence; and (4) future employment. See instructions regarding the reporting of negotiations for any of these arrangements or benefits. Non) future e s for any	ure employment. See instructions rega any of these arrangements or benefits	ymer se ar	ıt. Se range	e inst emen	ructi Is or	ons r benei	egaro	ding I	the re	port- None 🔀	×
Status and Ter	Status and Terms of any Agreement or Arrangement							Parties	es					<u></u>	Date
Example Pursuant to partnership agreement, v calculated on service performed thro	Pursuant to partnership agreement, will receive lump sum payment of capital account & partnership share calculated on service performed through $1/00$.	rtnership sha	re	Doe Jones	& Smiti	h, Hon	netowr	Smith, Hometown, State						~1	7/85
ļ-nd															
2		<u> </u>													
3															
4															
5															
6															

	The second secon			Some statement of the s
Reporting Individual's Name BIDEN, JOSEPH R., JR.		SCHEDULE D	יי	Page Number 10 of 10
Part I: Positions Held Outside U.S. Government	utside U.S. Gover		organization or educational institution. Exclude positions with religious	with religious,
Report any positions held during the applicable reporting period, whether compensated or not. Positions include but are not limited to those of an officer, director,	licable reporting period, whethe limited to those of an officer, c	pen- r,	organization of educational institution. Exclude positions with reasonal, fraternal, or political entities and those solely of an honorary	with rengious,
trustee, general partner, proprietor, representative, employee, or consultant of any corporation. firm, partnership, or other business enterprise or any non-profit	sentative, employee, or consult er business enterprise or any n			None X
Organization (Name and Address)	d Address)	Type of Organization	Position Held	. Yr.) To
Nat'l Assn. of Roc		educat	President	
Doe Jones & Smith, Hometown, State		Law firm	Partner	//85
1				
2				
3				
4-				
S				
6				
Part II: Compensation in Excess of \$5,000 Paid Report sources of more than \$5,000 compensation received by you or your business affiliation for services provided directly by you during any one year of the reporting period. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise, or any other	in Excess of \$5,00 pensation received by you or you directly by you during any one ames of clients and customers or usiness enterprise, or any other	non-profit organization we you directly provided the services generating a fee need not report the U.S.	Do not complete this part if you are an Incumbent, Termination Filer, or Vice when Presidential or Presidential Candidate. or payment of more than \$5,000. You None	part if you are an ion Filer, or Vice ential Candidate. You None
Source (Name and Address)	Address)		Brief Description of Duties	
Examples Doe Jones & Smith, Hometown, State Metro University (client of Doe Jones & Smith), Moneytown, State	th), Moneytown, State	Legal services Legal services in connection with university construction	iction	
1				
2				
3				
4				
S				
6				